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PATEN <sup>-</sup>	COMPLETE IF KNOWN							
	CFR 1.63)		Application Nu	ımber				
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I hereby declare that:  Each inventor's residence I believe the inventor(s) n						nich is claim	ned and for	
which a patent is sought	on the invention ent	itled:			Zi illatter wi	————		_
A METHOD FOR EXTRACTING CARBON DIOXIDE FOR USE AS A REFRIGERANT IN A VAPOR COMPRESSION SYSTEM								
the specification of which		(Title of the i	Invention)					_
is attached hereto	)							
OR								
was filed on (MM/DD/YYYY)  as United States Application Number or PCT International								
Application Number		and was amended	on (MM/DD	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			(if applicable	e).
Application Number and was amended on (MM/DD/YYYY) (if applicable).  I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as								
amended by any amendn	ent specifically refe	rred to above.	or the above	identined a	peomodilor	i, iriolaaliig	are dairis, as	
I acknowledge the duty continuation-in-part applie and the national or PCT in	cations, material infe	ormation which bec	ame availabl	e between				
I hereby claim foreign prinventor's or plant breeds country other than the Urapplication for patent, inv before that of the applicat	iority benefits unde er's rights certificate ited States of Amer entor's or plant bree ion on which priority	r 35 U.S.C. 119(a) (s), or 365(a) of any ica, listed below and der's rights certifica v is claimed.	-(d) or (f), or y PCT intern d have also i ite(s), or any	r 365(b) of ational app dentified be PCT interr	olication whi elow, by ch national app	ich designa ecking the olication ha	ated at least of box, any foreign ving a filing da	ne gn ate
Prior Foreign Applicati Number(s)	on Country	Foreign Filing (MM/DD/YY)		Prior Not Cla		Certified C	Copy Attache	d?
Additional foreign app	olication numbers ar	e listed on a supple	mental priori	ty data she	et PTO/SB/	02B attach	ed hereto.	

[Page 1 of 2]
This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

[Page 1 of 2]

## **DECLARATION** — Utility or Design Patent Application

Address 400 West Maple Road, Suite 350  City Birmingham  Telephone (248) 988-8360  I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements may jeopardize the validity of the application or any patent issued thereon.  NAME OF SOLE OR FIRST INVENTOR:  Given Name (first and middle [if any])  A petition has been filed for this unsigned inventor  Family Name or Surname Signature  A petition has been filed for this unsigned inventor  City Easthampton  MA  Country US  NAME OF SECOND INVENTOR:  A petition has been filed for this unsigned inventor  Family Name or Surname City Easthampton  NAME OF SECOND INVENTOR:  A petition has been filed for this unsigned inventor  Family Name or Surname  Citizenship US  NAME OF SECOND INVENTOR:  A petition has been filed for this unsigned inventor  Given Name (first and middle [if any])  NAME OF SECOND INVENTOR:  City Easthampton  NAME OF SECOND INVENTOR:  City Easthampton  Country  Citizenship  Date  Family Name or Surname  Citizenship  Date  Residence: City State  Country  Citizenship  Country  Citizenship  Citizenship  Citizenship  Country  Citizenship  Country  Citizenship	Direct all correspondence to:	<b>X</b> Custome	er Number:	02609	96		OR Correspondence address below				
Address 400 West Maple Road, Suite 350  City Birmingham  Telephone (248) 988-8360  I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements may jeopardize the validity of the application or any patent issued thereon.  NAME OF SOLE OR FIRST INVENTOR:  Given Name (first and middle [if any])  NAME OF SECOND INVENTOR:  State  MA  MA  MA  MA  MA  MA  MA  MA  MA  M	Name							,			
City Birmingham  Country United States  I relephone (248) 988-8360  I fax (248) 988-8363  I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements may jeopardize the validity of the application or any patent issued thereon.  NAME OF SOLE OR FIRST INVENTOR:  Given Name (first and middle [if any]) Tobias H.  Inventor's Signature  City Easthampton  MA  US  State  Country  Citizenship US  NAME OF SECOND INVENTOR:  A petition has been filed for this unsigned inventor  Signature  City Easthampton  MA  US  Country US  NAME OF SECOND INVENTOR:  A petition has been filed for this unsigned inventor  City Easthampton  MA  Date  1/2 4/03  Residence: City US  NAME OF SECOND INVENTOR:  A petition has been filed for this unsigned inventor  City Easthampton  Date  1/2 1/03  Residence: City State  Country US  NAME OF SECOND INVENTOR:  Given Name (first and middle [if any])  Township  Family Name or Surname  Date  Signature  Country  Citizenship  Date  Signature  City State  Country  Citizenship  Date  Signature  Country  Citizenship  Country  Citizenship  Date  Signature  Country  Citizenship  Country  Citizenship  Country  Citizenship	Karin H. Butchko										
City Birmingham  Country United States  Telephone (248) 988-8360  Telephone (248) 988-8360  I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.  NAME OF SOLE OR FIRST INVENTOR:  Given Name (first and middle [if any]) Tobias H.  Inventor's Signature  A petition has been filed for this unsigned inventor  Family Name or Surname Sienel  Date  ### Country US  NAME OF SECOND INVENTOR:  A petition has been filed for this unsigned inventor  City Easthampton  MA  US  VS  NAME OF SECOND INVENTOR:  A petition has been filed for this unsigned inventor  Family Name or Surname  Family Name or Surname  The properties of the sunsigned inventor  City Easthampton  NAME OF SECOND INVENTOR:  A petition has been filed for this unsigned inventor  Family Name or Surname  Date  Family Name or Surname  Date  Residence: City State Country Citizenship  Citizenship  Date  Residence: City State Country Citizenship  Country Citizenship  Country Citizenship  Country Citizenship	Address	0.50									
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Residence: City Easthampton MA US  Citizenship US  Mailing Address 22 Bayberry Drive  City Easthampton  MA  ZIP O1027 US  NAME OF SECOND INVENTOR:  Given Name (first and middle [if any])  Inventor's Signature  Residence: City  State  Country  A petition has been filed for this unsigned inventor  Family Name or Surname  Date  Citizenship  Mailing Address	Given Name		1		566011.					ied myemor	
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## **DECLARATION**

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